

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

MRS. PAMELA BURNS

Mailing Address 24022 570TH AVENUE

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| MANKATO | MN | 56001-7539 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

434.00

Transaction ID : SA17.854845

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 05 | | | 01 | | | 2012 | | | |

CONTRIBUTION

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)

MRS. PAMELA BURNS

Mailing Address 24022 570TH AVENUE

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| MANKATO | MN | 56001-7539 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

434.00

Transaction ID : SA17.858869

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 05 | | | 01 | | | 2012 | | | |

CONTRIBUTION

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)

MR. PATRICK A. BURNS

Mailing Address 35 PARKVIEW AVENUE
APARTMENT 5H

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| BRONXVILLE | NY | 10708-2963 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
MUTUAL OF AMERICA LIFE INSURANCE
COMPANY

Occupation
ATTORNEY

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Transaction ID : SA17.921992

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 05 | | | 17 | | | 2012 | | | |

CONTRIBUTION

Amount of Each Receipt this Period

2500.00

Subtotal Of Receipts This Page (optional).....

2750.00

Total This Period (last page this line number only).....